

|   |   |                          |   |                  |  |  |                   |  |
|---|---|--------------------------|---|------------------|--|--|-------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD<br>Effective October 1, 2001  |   |                          |   |                  | Application or Docket Number<br><i>10/053329</i> |  |                   |  |
| <b>CLAIMS AS FILED - PART I</b>   |   |                          |   |                  |  |  |                   |  |
| (Column 1)  |   | (Column 2)               |   |                  |  |  |                   |  |
| TOTAL CLAIMS  |   | <i>45</i>                |   |                  |  |  |                   |  |
| FOR   |   | NUMBER FILED             | NUMBER EXTRA                                |                  |  |  |                   |  |
| TOTAL CHARGEABLE CLAIMS   |   | <i>45</i> minus 20 =     | * <i>25</i>                                 |                  |  |  |                   |  |
| INDEPENDENT CLAIMS  |   | <i>27</i> minus 3 =      | * <i>7</i>                                  |                  |  |  |                   |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   | <input type="checkbox"/> |   |                  |  |  |                   |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |                          |   |                  |  |  |                   |  |
| <b>CLAIMS AS AMENDED - PART II</b>  |   |                          |   |                  |  |  |                   |  |
| (Column 1)  |   | (Column 2)               |   | (Column 3)       |  |  |                   |  |
| AMENDMENT A   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                               |                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |  |  |                   |  |
|   | Total   | * <i>136</i>             | Minus                                       | ** <i>144</i>    | = <i>0</i>                                       |  |                   |  |
| AMENDMENT B   | Independent   | * <i>20</i>              | Minus                                       | *** <i>20</i>    | = <i>0</i>                                       |  |                   |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                          |   |                  |  |  |                   |  |
| AMENDMENT C   |   |                          |   |                  | TOTAL<br>ADDIT. FEE                              |  |                   |  |
|   |   |                          |   |                  | TOTAL<br>ADDIT. FEE                              |  |                   |  |
| SMALL ENTITY TYPE <input type="checkbox"/>  |   |                          |   |                  | OTHER THAN<br>OR SMALL ENTITY                    |  |                   |  |
| RATE  |   | FEE                      |   |                  | RATE   |  | FEE               |  |
| BASIC FEE   |   | 370.00                   |   |                  | BASIC FEE  |  | 740.00            |  |
| X\$ 9=  |   |                          |   |                  | X\$18=   |  | <i>450</i>        |  |
| X42=  |   |                          |   |                  | X84=   |  | <i>336</i>        |  |
| +140=   |   |                          |   |                  | +280=  |  | <i>0</i>          |  |
| TOTAL   |   |                          |   |                  | TOTAL  |  | <i>1526</i>       |  |
| SMALL ENTITY OR OTHER THAN<br>SMALL ENTITY  |   |                          |   |                  | ADDITIONAL<br>FEE                                |  | ADDITIONAL<br>FEE |  |
| RATE  |   |                          |   |                  | RATE   |  | ADDITIONAL<br>FEE |  |
| X\$ 9=  |   |                          |   |                  | X\$18=   |  |                   |  |
| X42=  |   |                          |   |                  | X84=   |  |                   |  |
| +140=   |   |                          |   |                  | +280=  |  |                   |  |
| TOTAL<br>ADDIT. FEE   |   |                          |   |                  | TOTAL<br>ADDIT. FEE                              |  |                   |  |
| AMENDMENT B   |   |                          |   |                  | ADDITIONAL<br>FEE                                |  | ADDITIONAL<br>FEE |  |
| RATE  |   |                          |   |                  | RATE   |  | ADDITIONAL<br>FEE |  |
| X\$ 9=  |   |                          |   |                  | X\$18=   |  |                   |  |
| X42=  |   |                          |   |                  | X84=   |  |                   |  |
| +140=   |   |                          |   |                  | +280=  |  |                   |  |
| TOTAL<br>ADDIT. FEE   |   |                          |   |                  | TOTAL<br>ADDIT. FEE                              |  |                   |  |
| AMENDMENT C   |   |                          |   |                  | ADDITIONAL<br>FEE                                |  | ADDITIONAL<br>FEE |  |
| RATE  |   |                          |   |                  | RATE   |  | ADDITIONAL<br>FEE |  |
| X\$ 9=  |   |                          |   |                  | X\$18=   |  |                   |  |
| X42=  |   |                          |   |                  | X84=   |  |                   |  |
| +140=   |   |                          |   |                  | +280=  |  |                   |  |
| TOTAL<br>ADDIT. FEE   |   |                          |   |                  | TOTAL<br>ADDIT. FEE                              |  |                   |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.<br>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."<br>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."<br>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                          |   |                  |  |  |                   |  |